## M23000004

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer				
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J. HORNE				
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088
If there are any issues
please contact Patrice at
850-202-9071

Date:03	/11/2024							
Name:	Patrice Rush	_ <del>_</del>						
Reference #:	2295179	<del></del>						
Entity Name: BIRCH CREEK ENERGY, LLC								
☐ Articles o	of Incorporation/Authorization	on to Transact Business						
Amendm	ent							
	of Agent							
☐ Reinstate	ement							
Conversion	on							
☐ Merger								
☐ Dissolution	on/Withdrawal							
Fictitious	Name							
Other								
Authorized Amo	unt: <b>\$25</b>							
Signature:	(Pall							

F: +852.2682.9790



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Reference #:	2295179	
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Change	of Agent	
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Convers	ion	
☐ Merger		
☐ Dissoluti	on/Withdrawal	
Fictitious	s Name	
Other		
Authorized Amo	ount: <b>\$25</b>	
Signature:	(Pall	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:			Birch Creek Energy, LLC		
2. (a	1	880 APOLLO STREET		(b)	
<i>∠.</i> (	<del>-</del> ) .	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		SUITE 333			
		EL SEGUNDO, CA 90245		-	
		04/12/2023	_		M23000004785
3.		Date of filing/registration in Florida	4.		Document number
5. (	a ì	CORPORATION SERVICE COMPA	NY		
٥. (	٠.,	Registered Agent and Registered Office shown on the records of	the Flor	ida Dept. of State	- ::
		1201 HAYS STREET			
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRE	<u>(SS)</u>	-
		TALLAHASSEE . FL	. 32	2301-2525	-
					-
(1	o)	Cogency Global Inc.			
Enter name of NEW Registered Agent and/or NEW Registered Offi				address:	<del></del>
					24 MAR 11 AM 8: 54
		115 North Calhoun Street, Suite	4		
		NEW Registered Office Address:			
		-			S 3 5
		Tallahassee, FL	·	32301	
the cagen	ha: t w we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia- re authorized by an affirmative vote of the members of the of organization or the operating agreement of the	the reability of the 1	gistered office company, it is imited liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in
		Monique (ollins	_	Moniqu	ue Collins-Johnson
Sig	па	ure of acounting of a member			Printed or typed name of signee
prov the o to m	isio bli ere	by accept the appointment as registered agent and agrows of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have the properties of this change.	ee to a perfor d for in hereby	ict in this cape mance of my e i Chapter 605 confirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
Sion	atur	e of Registered Agent			
- UE,IFι	4141	o operational states			

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00